

Clinton County MRC Volunteer Skills Assessment Form

Adapted for use from Illinois Emergency Services Management Association (IESMA), MRC, Rotary International and VMST Application

NAME: _____ ADDRESS: _____ PHONE: _____

SKILLS: Please check all that apply.

COMMUNICATIONS

- _____ CB operator:
- _____ Own equip? _____
- _____ Ham operator: T G E
- _____ Call Sign: _____
- _____ Equipment: _____
- _____ Hotline Operator
- _____ Liaison
- _____ Own a cell phone
- _____ # _____
- _____ Own a Skyphone
- _____ # _____
- _____ Public Relations
- _____ Public Speaking
- _____ Web page design
- _____ Social Media
- _____ Media (Radio/TV/News)

LANGUAGE other than English:

- _____ French
- _____ German
- _____ Italian
- _____ Spanish
- _____ Other (Please list below) _____
- _____ American Sign

SUPPORT POSITIONS

- _____ Admin/Secretarial
- _____ Clerical - filing, copying
- _____ Computer Programming
- _____ Data entry/ Software: _____
- _____ Office Manager
- _____ Phone Receptionist
- _____ Volunteer Experience
- _____ ARC, CERT, DMAT,
- _____ MRC, EMA, UAN, Other: _____

PHYSICIAN

- _____ MD
- _____ DO
- _____ DDS/DMD

NURSING

- _____ RN
- _____ NP
- _____ LPN
- _____ CNA
- _____ MIDWIFE

TECHNICIANS

- _____ PHARMACY
- _____ RCP
- _____ RADIOLOGY
- _____ SURGICAL

PHARMACISTS

- _____ RPH
- _____ INT

OTHER MEDICAL/HEALTH

- _____ PSY
- _____ RP
- _____ LEP
- _____ LCSW
- _____ LSW
- _____ LCPC
- _____ MSW
- _____ MFC
- _____ ASW
- _____ ACSW
- _____ CADC
- _____ PSYCH TECH
- _____ SPIRITUAL CARE
- _____ DC
- _____ OPT
- _____ PA-C
- _____ EMT - BASIC
- _____ EMT - P
- _____ CAN
- _____ MEDICAL ASSISTANT
- _____ Other: _____

SERVICES

- _____ Animal care /sheltering
- _____ Animal rescue
- _____ Auto repair/towing
- _____ Community relations
- _____ Crime watch programs
- _____ Donations distribution
- _____ Education
- _____ Elderly/disabled care
- _____ Food Svc/Canteen
- _____ HR/ Personnel Mgmt
- _____ Licensed Day Care
- _____ Runner
- _____ Search and rescue
- _____ Security
- _____ Shelter operations
- _____ Social Svc/Casework
- _____ Supply
- _____ Traffic control
- _____ Warehousing

ENVIRONMENTAL

- _____ Sanitation
- _____ Toxic waste/HazMat
- _____ Waste Reduction/Mgmt
- _____ Water
- _____ Wildlife/Land Mgmt
- _____ Other Environmental: _____

STRUCTURAL

- _____ Damage assessment
- _____ Metal construction
- _____ Wood construction
- _____ Block construction
- _____ Cert. # _____
- _____ Plumbing
- _____ Cert. # _____
- _____ Electrical
- _____ Cert. # _____
- _____ Roofing
- _____ Cert. # _____

TRANSPORTATION

- _____ Car
- _____ Station wagon/mini van
- _____ Maxi-van, capacity _____
- _____ ATV
- _____ Own off-road veh/4wd
- _____ Own truck, description: _____
- _____ Own boat, capacity _____
- _____ Commercial driver
- _____ Class & license #: _____
- _____ Camper/RV, cap _____
- _____ & type: _____
- _____ Snowmobile
- _____ Bus
- _____ Tractor/trailer
- _____ Box truck

LABOR

- _____ Loading/shipping
- _____ Sorting/packing
- _____ Clean-up
- _____ Equipment operator
- _____ Types: _____

AVAILABLE EQUIPMENT

- _____ Backhoe
- _____ Chainsaw
- _____ Generator
- _____ Bobcat
- _____ Truck & Plow
- _____ Dump Truck
- _____ Trailer (open / closed)
- _____ Forklift
- _____ Other: _____

ANIMAL HEALTH CARE

- _____ Veterinarian (DMV)
- _____ Lg. Animal / Sm. Animal
- _____ Birds
- _____ Reptile
- _____ Other: _____
- _____ Vet Tech

State of Illinois Professional License Number: _____

If you have any other certifications or course completion certificates, please list them below and submit copies when returning this form:

Please mail or return completed form **with copies of all licenses and certifications** to:
Clinton County Health Department
Medical Reserve Corps Director
930-A Fairfax Street, Carlyle, IL 62231

Created Aug 2010; Revised Aug 2011